



Outline for Obtaining a Special Event Permit

1. Obtain Special Event Permit Application Form from the **Mayor's Office of Economic and Community Development (ECD)**, Metropolitan Courthouse, Suite 102, Nashville, TN 37201. Telephone: 862-6024 Fax: 862-6025
2. Return completed application form to Mayor's Office of ECD, Attn: Marilyn Edwards, at least forty-five (45) days prior to the event along with the permit fee of **thirty dollars (\$30)**. Make check payable to the **Mayor's Office of ECD**. Any permit application turned in less than forty-five (45) days prior to an event will be handled on a case by case basis. The permit may be approved if the tardiness of the application neither detracts from the planning of the event nor overburdens this office or any other relevant department. Late applications will be subject to a **fifty dollar (\$50)** late fee in addition to the **thirty dollar (\$30)** permit fee.
3. The completed application form and a Departmental Review Form will be distributed to representatives in the appropriate Metro Government Departments.
4. Department representatives will have ten (10) days to review the application and return the Departmental Review Form to the Mayor's Office of ECD. Committee members will recommend approval, denial or approval with changes and will also list any permits and/or prerequisites required by that department.
5. The Police Department representative will prepare a security/crowd control plan. This review might involve visiting the event site or riding the proposed event route.
6. Some larger, more involved events or first time events will require a meeting of relevant Metro Departments and the event organizer. The Director of Special Events will review all committee member recommendations and determine approval, denial or approval with changes.
7. The Director of Special Events will prepare a special event outline of all necessary permits and additional requirements. A sanitation deposit of **five hundred dollars (\$500)** may be required in the form of a check made payable to the Mayor's Office of ECD.
8. **Applicant must provide the Mayor's Office of Economic and Community Development with a copy of a certificate of general liability insurance with a minimum coverage of one million dollars (\$1,000,000). The policy must name Metropolitan Government of Nashville and Davidson County as additionally insured. If the policy(ies) must be endorsed, a copy of said endorsement is required. Any required certificates of insurance MUST be received and approved by this office no later than two weeks prior to the date of the event.**
9. Once the event organizer obtains all necessary permits and satisfies additional requirements, the Mayor's Office of ECD will issue a Special Event Permit. If the event permit is denied, the Mayor's Office of ECD will issue a letter of denial.



Special Event Permit Application

Please fill out completely. Write legibly or type.

1. Event Name: _____
2. Event Date(s): _____
3. a) Name of Organization: _____
b) Street Address: _____
c) City/State/Zip: _____
d) First Contact Person: _____
Work Phone: (____)____-____ Cell Phone: (____)____-____
Fax: (____)____-____ E-mail: _____
e) Second Contact Person: _____
Work Phone: (____)____-____ Cell Phone: (____)____-____
Fax: (____)____-____ E-mail: _____
f) Organization Type: Non-Profit _____ Government _____ Corporation _____
Other _____ (explain) _____
g) Promoter, if different from Organization: _____
h) Promoter Contact: _____
i) Promoter Phone: (____)____-____ Fax: (____)____-____
E-mail: _____
4. Purpose of event: _____

5. Give a brief description of the event: _____

6. Is this a first time event? _____ If not, how old? _____
Please list any variations from previous year: _____

7. Festival Location: Park _____ Street _____ Park and Street _____ Bridge _____
8. Name of Park, Bridge and/or Street(s): _____

9. Event Type: (check all that apply)

Block Party _____ Concert _____ Filming _____ Parade _____ Fireworks _____
Run/Walk _____ Festival _____ Sporting Event _____
Other _____ (explain) _____

10. Festival Operation Schedule (specify day, date and times):

Indicate S for set up, E for event day, T for tear down

If you need more room, list on a separate sheet of paper.

11. a) Estimated attendance per day: _____

b) Estimated peak attendance at any given time _____

12. Is this a charity event? Yes _____ No _____

If so, please list name of organizations, contact name, phone number and address for each organization:

<u>Organization</u>	<u>Contact Name</u>	<u>Phone Number</u>	<u>Address</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

13. Will this event be open to the public _____ or by invitation only _____?

14. Will you charge admission? Yes _____ No _____

15. Will you be taking donations? Yes _____ No _____

16. List all streets/bridges you propose to close:

<u>Street (indicate cross streets)</u>	<u>Closing Date/Time</u>	<u>Opening Date/Time</u>
example: Broadway (1 st Ave. to 5 th Ave.)	07/01/07 at 10:00 am	07/03/07 at 9:00 pm
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you need more room, list on a separate sheet of paper.

17. List location and number of any parking meters you propose bagging. Also note dates you will need them bagged: _____

18. Will Food be served _____ and/or prepared _____ at your event?

How many food vendors do you anticipate having? _____

How will food be prepared? LP gas _____ Grill _____ Propane _____ Butane _____

19. Will alcoholic beverages be available at your event? Yes _____ No _____

If so, please answer all of the following:

a) What type of alcoholic beverages will be available?

Beer _____ Wine _____ Spirituous Liquor _____

b) Will alcoholic beverages be sold by the drink _____ or given away _____?

c) Note what days, dates and times alcoholic beverages will be available:

20. Will there be any live entertainment or music at your event? Yes _____ No _____

If so, please answer all of the following:

d) Will stages be built? Yes _____ No _____ If yes, how many? _____

e) What time will the performances take place each day?

<u>Date</u>	<u>Start Time</u>	<u>Finish Time</u>
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_____	_____	_____
_____	_____	_____

If you need more room, list on a separate piece of paper.

21. Will additional electrical wiring be installed for your event? Yes _____ No _____

22. Will you be using generators _____ and/or utility power _____?

23. Will tents be erected for your event? Yes _____ No _____ If so, how many? _____

24. Will you require access to water? Yes _____ No _____

25. Have you arranged for security at your event? Yes _____ No _____

If so, who will be providing security: _____

26. Describe your plans for Emergency Medical Services: _____

27. Describe your plans for trash removal, as well as any organizations or persons directly involved with this aspect of the event: _____

Applicant must provide the Mayor's Office of Economic and Community Development with a copy of a certificate of general liability insurance with a minimum coverage of one million dollars (\$1,000,000). The policy must name Metropolitan Government of Nashville and Davidson County as additionally insured. If the policy(ies) must be endorsed, a copy of said endorsement is required. Any required certificates of insurance MUST be received and approved by this office no later than two weeks prior to the date of the event.

This application will not be processed unless a site map is included. Indicate location of tents, stages, portable rest rooms, fencing, food booths, alcoholic and non-alcoholic beverage booths, etc. Also indicate where streets will be blocked and how (fencing, barricades, stages, tents, etc.).

This application will not be processed unless all debts owed to the Metropolitan Government of Nashville and Davidson County relating to a prior special event permit/application have been paid in full. This application will not be processed if a default judgment has been previously entered against you for money owed to the Metropolitan Government of Nashville and Davidson County.

All information in this application and the enclosed site map is accurate to the best of my knowledge. I understand that if any changes are made to the site layout, I must submit a revised site map to the Mayor's Office of Economic and Community Development. Each revision will be approved and stamped by the Fire Marshal's Office and returned to me. I also understand that any changes made to the site layout which occur during event set up or during the actual event, must also be approved by the Mayor's Office of Economic and Community Development, the Fire Department and the Fire Marshal's Office. Approval will require a representative from at least one of the above offices visiting the event site to approve the changes.

I understand that not following any of the above may result in a fine of up to five hundred dollars (\$500.00).

Signature

Date

Return the completed application along with a check for thirty dollars (\$30.00), made out to the Mayor's Office of Economic and Community Development, to our offices at the Metropolitan Courthouse, Suite 102, Nashville, TN 37201, Attn: Marilyn Edwards. If you have any questions regarding filling out the application, call Marilyn Edwards at 862-6024.

For Official Use - Do not write below this line.

Date Received _____ Date Distributed _____ Dept. Return Date _____ Permit # _____

INDEMNIFICATION AND HOLD HARMLESS

Subject to the granting of all permits required by the Metropolitan Code of Laws and subject to all terms and conditions with those permits, the Metropolitan Government of Nashville and Davidson County ("Metro") authorizes _____
(SPECIAL EVENTS APPLICANT) to utilize the SITES(s) known as _____

for the purposes of conducting the activities described in the special events permit application.

The SPECIAL EVENTS APPLICANT agrees that the Metropolitan Government of Nashville and Davidson County assumes NO responsibility or liability for any defects or other conditions of the SITES(s), whether the conditions are known or unknown to either party, and/or discoverable by either party. The SPECIAL EVENTS APPLICANT agrees to assume the risk for any and all defects and/or other conditions, whether these defects or other conditions are dangerous and/or whether these defects or other conditions are discoverable by either party, and/or known or unknown to either party.

The SPECIAL EVENTS APPLICANT shall indemnify and hold METRO and its officers, agents and employees harmless and free from any and all claims, including but not limited to personal injury, property damage, alleged to have arisen or resulted wholly or partially from the exercise of any of the rights granted herein to the SPECIAL EVENTS APPLICANT. This indemnification and hold harmless includes, but is not limited to, the payment of all attorney fees, expenses, costs, judgment and other expenses which may be incurred by METRO, its officers, agents or employees as a result of any and all such claims.

ON BEHALF OF SPECIAL EVENTS APPLICANT

By: _____

Title: _____

Date: _____

CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) XXXXXX
PRODUCER Insurance Company Address Phone Number	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED Insured Company – Must be Permit Applicant Address	INSURERS AFFORDING COVERAGE	NAIC #
	INSURER A: ABC Insurance Company	
	INSURER B: XYZ Insurance Company	
	INSURER C:	
	INSURER D:	
INSURER E:		

COVERAGES

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or conditions of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of such policies. Limits shown may have been reduced by paid claims.

CD LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS	
A	General Liability <input checked="" type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims made <input checked="" type="checkbox"/> Occur <input type="checkbox"/> Owner's & Contractor's Prot. <input checked="" type="checkbox"/> Liquor Liability <input type="checkbox"/> Other	Xxxx12345678	7/01/07	7/01/08	General Aggregate	\$1,000,000
		Aaaa4567890	7/01/07	7/01/08	Products - Comp/op Agg Personal & Adv Injury Each Occurrence Fire Damage (any one fire) Med Exp (Any one person)	\$1,000,000 \$1,000,000 \$1,000,000 \$ 50,000 \$ NA
A	Automobile Liability <input checked="" type="checkbox"/> Any auto <input type="checkbox"/> All owned autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos <input type="checkbox"/> Garage Liability	Yyyy98764543	7/01/07	7/01/08	Combined Single Limit	\$1,000,000
					Bodily Injury (per person)	\$1,000,000
					Property Damage	\$ 50,000
	Excess Liability <input type="checkbox"/> Umbrella <input type="checkbox"/> Other than Umbrella Form				Each Occurrence	\$
					Retention	\$
					Aggregate	\$
B	<input type="checkbox"/> Workers Compensation and Employers Liability				Statutory Limits Disease-Policy Limit Disease- Each emp Employers Liability	x \$ \$ \$
	<input type="checkbox"/> Other Professional Liability					\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Certificate Holder Metropolitan Government of Nashville and Davidson County is named as an additional insured.

CERTIFICATE HOLDER METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY METROPOLITAN COURTHOUSE, SUITE 102 ONE PUBLIC SQUARE NASHVILLE, TN 37201	CANCELLATION Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the Left. <i>SIGNATURE OF AUTHORIZED REPRESENTATIVE</i>
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